

2 of 2

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**PATENT APPLICATION FEE DETERMINATION RECORD**  
 Substitute for Form PTO-875

Application or Docket Number

09-831253

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT	(37 CFR 1.16(d))	

\* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY

OR

RATE	FEES
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	

OTHER THAN  
SMALL ENTITY

RATE	FEES
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	

TOTAL

TOTAL

**CLAIMS AS AMENDED - PART II**

11-10-05

(Column 1)

(Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			Minus	=
Total (37 CFR 1.16(c))	*	17	Minus	** 20 =
Independent (37 CFR 1.16(b))	*	1	Minus	*** 3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

SMALL ENTITY

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	/
X \$ _____ =	/
+ \$ _____ =	/

OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X \$ _____ =	/
X \$ _____ =	/
+ \$ _____ =	/

TOTAL  
ADD'L FEETOTAL  
ADD'L FEE

(Column 1)

(Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			Minus	=
Total (37 CFR 1.16(c))	*		**	=
Independent (37 CFR 1.16(b))	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE

ADDI-  
TIONAL  
FEE

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	

RATE

ADDI-  
TIONAL  
FEE

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	

TOTAL  
ADD'L FEE

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			Minus	=
Total (37 CFR 1.16(c))	*		**	=
Independent (37 CFR 1.16(b))	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE

ADDI-  
TIONAL  
FEE

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	

RATE

ADDI-  
TIONAL  
FEE

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	

TOTAL  
ADD'L FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

07/28/2002

1 of 2

CLAIMS AS FILED - PART I			
NUMBER FILED		NUMBER EXTRA	
10	10	0	0
TOTAL CHARGEABLE CLAIMS:		minus 20 =	
INDEPENDENT CLAIMS:		minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT.			
N <input type="checkbox"/>			
<small>If the difference in column 1 is less than zero, enter '0' in column 2.</small>			

**CLAIMS AS AMENDED - PART II**

(Column 1)		(Column 2)		(Column 3)	
CLAMS REMAINING AFTER 20 AMENDMENT	NUMBER MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
10	minus 10	20	0		
Independent	minus 3	3	0		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

*12/16/02*

(Column 1)		(Column 2)		(Column 3)	
CLAMS REMAINING AFTER 20 AMENDMENT	NUMBER MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
10	minus 10	20	0		
Independent	minus 3	3	0		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

*10/21/02*

(Column 1)		(Column 2)		(Column 3)	
CLAMS REMAINING AFTER 20 AMENDMENT	NUMBER MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
10	minus 10	20	0		
Independent	minus 3	3	0		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

If the difference in column 1 is less than zero, enter '0' in column 2. If the difference in this space is less than 20, enter '20'. If the difference in this space is less than 3, enter '3'. If the difference in this space is less than zero, enter '0' in column 2. If the difference in this space is less than 20, enter '20'. If the difference in this space is less than 3, enter '3'.

SMALL ENTITY		OTHER THAN SMALL ENTITY	
TYPE	OR	TYPE	OR
RATE	PER	RATE	PER
BASIC FEE	500		
XS 9-		XS 18-	
X40-		X80-	
+135-		+270-	
TOTAL 500		OR TOTAL	

SMALL ENTITY		OTHER THAN SMALL ENTITY	
TYPE	OR	TYPE	OR
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9-		XS 18-	
X40-		X80-	
+135-		+270-	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

SMALL ENTITY		OTHER THAN SMALL ENTITY	
TYPE	OR	TYPE	OR
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9-		XS 18-	
X40-		X80-	
+135-		+270-	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

SMALL ENTITY		OTHER THAN SMALL ENTITY	
TYPE	OR	TYPE	OR
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9-		XS 18-	
X40-		X80-	
+135-		+270-	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

**BEST AVAILABLE COPY**